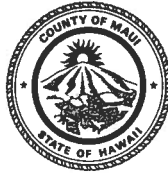


ALAN M. ARAKAWA
Mayor



LANCE T. HIROMOTO
Director

DAVID J. UNDERWOOD
Deputy Director

COUNTY OF MAUI
DEPARTMENT OF PERSONNEL SERVICES

200 S. HIGH STREET • WAILUKU, MAUI, HAWAII 96793-2155
PHONE (808) 270-7850 • FAX (808) 270-7969

Website: www.mauicounty.gov/departments/Personnel • Email: personnel.services@mauicounty.gov

October 18, 2011

Ms. Barbara F. Coriell, Administrator
Hawai'i Employer-Union Health Benefits Trust Fund
P.O. Box 2121
Honolulu, Hawai'i 96805

Dear Ms. Coriell:

Subject: County of Maui Rate Schedules Effective January 1, 2012

Please find enclosed employer/employee contribution rates schedules for the County of Maui effective January 1, 2012.

The County of Maui will contribute 60% of the EUTF premium rate based on the prevalent medical benefit plan, 100% of all administrative fees, 100% of the group life insurance plan premium, and 100% of the difference between family and two-party dental (i.e., "attributable Children Dental Cost") for all bargaining units provided that contributions for bargaining units 1, 11, and 12 are subject to change as a result of current collective bargaining. The employer contributions for all PPO, HMO, and HDHP plans are based on the prevalent medical benefit plan as of December 31, 2010 (HMSA 80/20 PPO).

Your assistance in posting these rate schedules on your website will be greatly appreciated.

Should you have any questions, please call me or my deputy, David Underwood, at 270-7850.

Sincerely,

A handwritten signature in black ink that reads "Lance T. Hiromoto".

Lance T. Hiromoto
Director of Personnel Services

Enclosures

HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND
COUNTY OF MAUI - ACTIVE EMPLOYEES
BU'S 01, 02, 03, 04, 11, 13
Effective January 1, 2012 through June 30, 2013

| | Type of Enrollment | Total Premium Rate | EUTF Admin Fee | Total Monthly Contribution Required | Monthly Employer Contribution | Monthly Employee Contribution |
|--|--|--------------------|----------------|-------------------------------------|-------------------------------|-------------------------------|
| MEDICAL PLANS | | | | | | |
| HMSA 90/10 PPO <i>RSN Chiro, No Prescription Drug</i> | Self | 342.88 | 2.16 | 345.04 | 198.50 | 146.54 |
| | Two-Party | 831.76 | 4.48 | 836.24 | 480.76 | 355.48 |
| | Family | 1060.13 | 6.55 | 1066.68 | 613.60 | 453.08 |
| HMSA 80/20 PPO <i>RSN Chiro, No Prescription Drug</i> | Self | 327.24 | 2.16 | 329.40 | 198.50 | 130.90 |
| | Two-Party | 793.78 | 4.50 | 798.28 | 480.76 | 317.52 |
| | Family | 1011.71 | 6.57 | 1018.28 | 613.60 | 404.68 |
| Prescription Drug Only - PPO Plans <i>Note: Rates could increase depending on result of protest</i> | Self | 60.80 | 0.60 | 61.40 | 37.08 | 24.32 |
| | Two-Party | 147.76 | 1.28 | 149.04 | 89.94 | 59.10 |
| | Family | 188.28 | 1.88 | 190.16 | 114.84 | 75.32 |
| NOTE: | Remember to add Prescription Drug coverage cost to PPO Medical cost to determine the full cost of your plan. | | | | | |
| HMSA HMO <i>RSN Chiro, Includes Prescription Drug</i> | Self | 450.00 | 2.76 | 452.76 | 235.58 | 217.18 |
| | Two-Party | 1092.04 | 5.76 | 1097.80 | 570.70 | 527.10 |
| | Family | 1391.85 | 8.43 | 1400.28 | 728.44 | 671.84 |
| HMSA High Deductible Health Plan (HDHP) <i>Includes Prescription Drug, No Chiro</i> | Self | 339.64 | 2.76 | 342.40 | 235.58 | 106.82 |
| | Two-Party | 824.44 | 5.76 | 830.20 | 570.70 | 259.50 |
| | Family | 1051.42 | 8.38 | 1059.80 | 728.44 | 331.36 |
| Kaiser Basic HMO <i>RSN Chiro, Includes Prescription Drug</i> | Self | 376.70 | 2.74 | 379.44 | 235.58 | 143.86 |
| | Two-Party | 914.74 | 5.78 | 920.52 | 570.70 | 349.82 |
| | Family | 1166.37 | 8.43 | 1174.80 | 728.44 | 446.36 |
| Kaiser Comprehensive HMO <i>RSN Chiro, Includes Prescription Drug</i> | Self | 432.06 | 2.74 | 434.80 | 235.58 | 199.22 |
| | Two-Party | 1049.30 | 5.78 | 1055.08 | 570.70 | 484.38 |
| | Family | 1338.05 | 8.43 | 1346.48 | 728.44 | 618.04 |
| HMSA Supplemental Plan (Coinsurance Plan) <i>RSN Chiro, Includes Supp. Prescription Drug</i> | Self | 206.28 | 2.76 | 209.04 | 126.52 | 82.52 |
| | Two-Party | 500.36 | 5.76 | 506.12 | 305.98 | 200.14 |
| | Family | 637.37 | 8.43 | 645.80 | 390.84 | 254.96 |
| Royal State Supplemental (Copay Plan) <i>RSN Chiro, Includes Supp. Prescription Drug</i> | Self | 40.67 | 2.77 | 43.44 | 27.16 | 16.28 |
| | Two-Party | 101.03 | 5.77 | 106.80 | 66.38 | 40.42 |
| | Family | 112.29 | 8.43 | 120.72 | 75.80 | 44.92 |
| DENTAL PLAN | | | | | | |
| HDS Dental | Self | 28.84 | 0.32 | 29.16 | 17.62 | 11.54 |
| | Two-Party | 57.68 | 0.64 | 58.32 | 35.24 | 23.08 |
| | Family | 94.88 | 0.96 | 95.84 | 72.76 | 23.08 |
| VISION PLAN | | | | | | |
| VSP Vision | Self | 5.96 | 0.08 | 6.04 | 3.66 | 2.38 |
| | Two-Party | 11.04 | 0.12 | 11.16 | 6.74 | 4.42 |
| | Family | 14.42 | 0.18 | 14.60 | 8.82 | 5.78 |
| LIFE INSURANCE | | | | | | |
| Royal State National | Employee | 4.16 | | 4.16 | 4.16 | 0.00 |

For BU's 01 and 11: Employee contributions subject to change as a result of collective bargaining agreements
Prescription drug rates will not be final until the resolution of the procurement protest hearing

10/10/2011

HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND
COUNTY OF MAUI - ACTIVE EMPLOYEES
BU 12

Effective January 1, 2012 through June 30, 2013

| | Type of Enrollment | Total Premium Rate | EUTF Admin Fee | Total Monthly Contribution Required | Monthly Employer Contribution | Monthly Employee Contribution |
|--|--|--------------------|----------------|-------------------------------------|-------------------------------|-------------------------------|
| MEDICAL PLANS | | | | | | |
| HMSA 90/10 PPO <i>RSN Chiro, No Prescription Drug</i> | Self | 285.46 | 2.14 | 287.60 | 165.58 | 122.02 |
| | Two-Party | 713.02 | 4.50 | 717.52 | 412.76 | 304.76 |
| | Family | 923.69 | 6.55 | 930.24 | 535.48 | 394.76 |
| HMSA 80/20 PPO <i>RSN Chiro, No Prescription Drug</i> | Self | 272.44 | 2.12 | 274.56 | 165.58 | 108.98 |
| | Two-Party | 680.48 | 4.48 | 684.96 | 412.76 | 272.20 |
| | Family | 881.51 | 6.57 | 888.08 | 535.48 | 352.60 |
| Prescription Drug Only - PPO Plans <i>Note: Rates could increase depending on result of protest</i> | Self | 44.92 | 0.60 | 45.52 | 27.54 | 17.98 |
| | Two-Party | 112.44 | 1.28 | 113.72 | 68.74 | 44.98 |
| | Family | 145.68 | 1.88 | 147.56 | 89.28 | 58.28 |
| NOTE: | Remember to add Prescription Drug coverage cost to PPO Medical cost to determine the full cost of your plan. | | | | | |
| HMSA HMO <i>RSN Chiro, Includes Prescription Drug</i> | Self | 377.60 | 2.76 | 380.36 | 193.12 | 187.24 |
| | Two-Party | 943.92 | 5.76 | 949.68 | 481.50 | 468.18 |
| | Family | 1222.97 | 8.43 | 1231.40 | 624.76 | 606.64 |
| HMSA High Deductible Health Plan (HDHP) <i>Includes Prescription Drug, No Chiro</i> | Self | 282.48 | 2.76 | 285.24 | 193.12 | 92.12 |
| | Two-Party | 706.24 | 5.76 | 712.00 | 481.50 | 230.50 |
| | Family | 915.56 | 8.40 | 923.96 | 624.76 | 299.20 |
| Kaiser Basic HMO <i>RSN Chiro, Includes Prescription Drug</i> | Self | 313.06 | 2.74 | 315.80 | 193.12 | 122.68 |
| | Two-Party | 781.82 | 5.78 | 787.60 | 481.50 | 306.10 |
| | Family | 1012.57 | 8.43 | 1021.00 | 624.76 | 396.24 |
| Kaiser Comprehensive HMO <i>RSN Chiro, Includes Prescription Drug</i> | Self | 370.42 | 2.74 | 373.16 | 193.12 | 180.04 |
| | Two-Party | 925.26 | 5.78 | 931.04 | 481.50 | 449.54 |
| | Family | 1198.45 | 8.43 | 1206.88 | 624.76 | 582.12 |
| HMSA Supplemental Plan (Coinsurance Plan) <i>RSN Chiro, Includes Supp. Prescription Drug</i> | Self | 162.74 | 2.74 | 165.48 | 100.38 | 65.10 |
| | Two-Party | 408.72 | 5.76 | 414.48 | 250.98 | 163.50 |
| | Family | 536.25 | 8.43 | 544.68 | 330.18 | 214.50 |
| Royal State Supplemental (Coplay Plan) <i>RSN Chiro, Includes Supp. Prescription Drug</i> | Self | 40.67 | 2.77 | 43.44 | 27.16 | 16.28 |
| | Two-Party | 101.03 | 5.77 | 106.80 | 66.38 | 40.42 |
| | Family | 112.29 | 8.43 | 120.72 | 75.80 | 44.92 |
| DENTAL PLAN | | | | | | |
| HDS Dental | Self | 28.84 | 0.32 | 29.16 | 17.62 | 11.54 |
| | Two-Party | 57.68 | 0.64 | 58.32 | 35.24 | 23.08 |
| | Family | 94.88 | 0.96 | 95.84 | 72.76 | 23.08 |
| VISION PLAN | | | | | | |
| VSP Vision | Self | 5.96 | 0.08 | 6.04 | 3.66 | 2.38 |
| | Two-Party | 11.04 | 0.12 | 11.16 | 6.74 | 4.42 |
| | Family | 14.42 | 0.18 | 14.60 | 8.82 | 5.78 |
| LIFE INSURANCE | | | | | | |
| Royal State National | Employee | 4.16 | | 4.16 | 4.16 | 0.00 |

All employee contributions subject to change as a result of collective bargaining agreements
Prescription drug rates will not be final until the resolution of the procurement protest hearing

10/10/2011